

PROTECTING and Building WARMTH

Allowing strong warmth in the present moment builds healthier bodies for the future.

STEP 1: Don't be fooled into thinking that fever is an illness and should always be suppressed. Advertisements may tell you that reducing fever is part of compassionate parenting, but that is done to sell medicine, not because it is good medical science.

Here are some of the summary recommendations from the American Academy of Pediatrics' *Clinical Report—Fever and Antipyretic Use in Children*:

“Appropriate counseling on the management of fever begins by helping parents understand that fever, in and of itself, is not known to endanger a generally healthy child. In contrast, fever may actually be of benefit; thus, the real goal of antipyretic therapy is not simply to normalize body temperature but to improve the overall comfort and well-being of the child... When counseling a family on the management of fever in a child, pediatricians and other health care providers should minimize fever phobia and emphasize that antipyretic use does not prevent febrile seizures.”

<http://pediatrics.aappublications.org/content/pediatrics/127/3/580.full.pdf>

STEP 2: Routinely suppressing fever can have health consequences

A very large study of more than 200,000 children from 34 countries studied the use of Paracetamol (the form of Acetaminophen—i.e., Tylenol, commonly used in other parts of the world) and found that:

- “use of paracetamol for fever in the first year of life was associated with an increased risk of asthma symptoms when aged 6–7 years”—*with an average 46% increased risk of asthma when a child reached first grade age!*
- “Current use of paracetamol was associated with a dose-dependent increased risk of asthma symptoms.” *This study found that high use—defined as currently using Paracetamol at least once a month—was associated with a more than 300% increase in asthma risk at age 6-7 years!*
- Risks of developing rhinoconjunctivitis (hayfever) and eczema were also both elevated.

<https://www.ncbi.nlm.nih.gov/pubmed/18805332>

A Different Way of Working: Studies have also shown that “Certain features of the anthroposophic lifestyle, such as restrictive use of antibiotics and antipyretics [fever reducers], are associated with a reduced risk of allergic disease in children.” It confirmed:

- “Early use of antipyretics was related to an increased risk of asthma [increased risk by 54%] and atopic eczema [increased risk of 32%].”
- “Use of antibiotics during first year of life was associated with increased risks of rhinoconjunctivitis [hayfever, increased risk 97%], asthma [increased risk 197%], and atopic eczema [increased risk 63%].”

<https://www.ncbi.nlm.nih.gov/pubmed/16387585>

STEP 3: Warmth changes our physiology—it supports comfort and connection with ourselves, as well as empathy and kindness towards others:

- Children with autism show less “irritability, hyperactivity, stereotypy, and inappropriate speech” when they are having a fever, and these effects seem to last even after the fever has finished.

<https://www.ncbi.nlm.nih.gov/pubmed/18055656>

And in study of college students:

- “participants who briefly held a cup of hot (versus iced) coffee judged a target person as having a ‘warmer’ personality (generous, caring),” and
- “participants holding a hot (versus cold) therapeutic pad were more likely to choose a gift for a friend instead of for themselves.”

<https://www.ncbi.nlm.nih.gov/pubmed/18948544>

We would like to help change the health of 10,000 children—support our goal and share this with your friends!

If you find this information helpful, let us know at DenverTherapies.com

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STEP 4: So what can I do?

Protect Warmth: Children have smaller bodies and so they lose heat much more quickly than adults. Here are some good rules of thumb:

- A small child needs at least one more layer of clothing that you do to stay warm. This is true in all seasons!
- Small children do not accurately sense their own warmth, so if you ask one “Are you cold?” and they say “No!” that means almost nothing. Do a spot check—if their hands and feet are not warm, then they are not wearing enough clothing.
- What to do for a child who won’t keep a jacket on? Put a warm layer next to the skin. Non-itchy merino wool and silk blends are best. Children actually love this!
- What’s the most efficient way to warm your feet? —Put on a hat. Do you have a child who gets fussy, is easily irritable, or gets sick a lot? Keep them in a hat.

Encourage Warmth: If you see that your child is getting pale, fussy, has less appetite, and is probably coming down with something:

- Go to a light food diet (no protein), and a quiet sensory diet (no stimulus, no rush)
- Move to an earlier bedtime, drink hot tea, and sleep in extra layers of blankets or pajamas to really create strong warmth (almost like a mini-fever)

If your child is already getting sick:

- there is a stage when a child is chilled and the fever is beginning, when the head is hot but the hands and feet are cool. This is where you can help a child get through an illness more efficiently by **warming the feet with a hot water bottle** (or other hot pack) and put them under covers.

Learn Some Tools to Move Excess Warmth (but not suppress the whole fever process):

Lemon Juice Calf Compresses: if a child’s calves feel hot and a fever is 102-103°F or higher, calf compresses can be applied to help eliminate excess heat and bring it down away from the head. *It is very important if you do this that the person does not get chilled!*

Directions: fill a bowl half-way with warm water, then cut a lemon in half under the water and squeeze out the juice. No lemons at home? Substitute a tablespoon of apple cider vinegar. Cotton socks (or washcloths or dishtowels) should then be soaked in the warm lemon water and wrung out until they are no longer dripping. Hint: Cutting out the toes of a pair of socks is actually easiest, as it allows you to pull them up high around the calf muscles and they will stay in place. Larger towels should be placed under the legs, brought up around the socks and then the whole child covered with blankets. The child’s abdomen should remain covered the whole time (it is very important not to catch a chill—if this happens the socks process should be stopped and the body re-warmed with blankets and hot water bottles). The socks (or washcloths/dishtowels) should be dry after 20-25 minutes. If the person falls asleep with them in place they can be left there as long as the legs remain warm.

If your child is uncomfortable during high fever, a lemon juice compress will bring the temperature down several degrees in about 10-15 minutes. If your child relaxes and is clearer, then you know discomfort was from the fever. If your child is flushed but not uncomfortable and responds to you appropriately, there is no need to treat the fever (see guidelines from AAP at the top).

Make sure your child stays well-hydrated. Create a calm, nurturing environment to rest.

Instead of being fearful, look at your child and see what he or she needs. And if you do these things and are still nervous, then talk to your medical provider. But try these things first—you will likely be surprised at how well they work.

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